



## Discontinuation of Treatment or Study (Adult)

Patient ID \_\_\_ - \_\_\_ ID \_\_\_ - \_\_\_

Date Form Completed: **DFCDATE**

**Instruction:** Complete this form when the patient prematurely discontinues study medication, study participation or both.

1. Time period: 1  Treatment 2  Follow-up **TIMEP**
2. Is this a discontinuation in study medication and/or study participation? (check all that apply)
  - Study medication (complete Section I) **SMED**
  - Study participation (complete Section II) **SPART**

### SECTION I: STUDY MEDICATION

1. Reason(s) for discontinuing study medication(s) (check all that apply):
  - Withdrawal of informed consent **RMWCONS**
  - Hypersensitivity reaction **RMHYPS**
  - Neutropenia **RMNEUT**
  - Pulmonary function impairment **RMPF**
  - Hepatic decompensation **RMHDC**
  - Anemia **RMANEM**
  - Autoimmune hepatitis **RMAUTO**
  - Renal function impairment **RMRF**
  - Pregnancy **RMPREG**
  - Ophthalmologic disorder **RMOPH**
  - Psoriatic lesion **RMPSOR**
  - Grade IV toxicity **RMTOX4**
  - Hypoglycemia, hyperglycemia or diabetes mellitus **RMDIAB**
  - Virological non-response **RMVNRSP**
  - Thyroid disorder/dysfunction **RMTHYD**
  - Virological breakthrough **RMVBRK**
  - Depression or other psychiatric or mood disorder **RMPSY**
  - Adverse event other than those listed **RMAE**, specify \_\_\_\_\_ **RMAES**
  - Investigator discretion **RMINV**, explain \_\_\_\_\_ **RMINVS**
2. Date of last dose of entecavir (mm/dd/yy): **LDEM / LDED / LDEY**
3. Date of last dose of peginterferon (mm/dd/yy): **LDPM / LDPD / LDPY**

### SECTION II: STUDY PARTICIPATION

1. Reason(s) for discontinuing study participation (check all that apply):
  - Patient lost to follow-up **RSLFUP**
  - Withdrawal of informed consent **RSWCONS**
  - Patient on alternate therapy for HBV **RSHBVTX**
  - Investigator discretion **RSINV**, explain \_\_\_\_\_ **RSINVS**
  - Other **RSOTH**, specify \_\_\_\_\_ **RSOTHS**
2. Date withdrawn (or considered to be withdrawn) (mm/dd/yy): **WDM / WDD / WDY**
3. Date of last contact (mm/dd/yy): **LCM / LCD / LCY**